## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

|   |  | S FILED - I<br>(Column                    |                   |               | (Column 2)                      |  | SMALL ENTITY TYPE |                     | OTHER THAN OR SMALL ENTITY |            |                     |                        |
|---|--|---|-------------------|---------------|---------------------------------|--|-------------------|---------------------|----------------------------|------------|---------------------|------------------------|
| TOTAL CLAIMS  |  |   | Q0                |               |                                 |  | . [               | RATE                | FEE                        | ) <b>.</b> | RATE                | FEE                    |
| FOR   |  |   | NUMBER FILED      |               | NUMB                            | NUMBER EXTRA                                 |                   | BASIC FEE           | 355.00                     | OR         | BASIC FEE           | <del></del> .          |
| TOTAL CHARGEABLE CLAIMS   |  |   | ○ minus 20=       |               | · Ø                             |  |                   | X\$ 9=              |                            | OR         | X\$18=              |                        |
| INDEPENDENT CLAIMS  |  |   | minus 3 =         |               | . 14                            |  |                   | X40=                |                            | OR         | X80=                | 320                    |
| MU  | LTIPLE DEPEN   | DENT CLAIM PI                             | RESENT            |               |                                 |  |                   | +135=               |                            | OR         | +270=               |                        |
| * If  | the difference                                       | in column 1 is                            | less than ze      | ro, ente      | r "0" in c                      | r "0" in column 2                            |                   | TOTAL               |                            | OR         | TOTAL               | 1030                   |
|   | CI   | LAIMS AS A                                | MENDED            | - PAR         | IT II                           | T II   |                   | <del></del>         |                            | l          | OTHER               | THAN                   |
|   |  | (Column 1)                                |                   | (Colu         | mn 2)<br>HEST                   | (Column 3)                                   |                   | SMALL               |                            | OR         | SMALL               |                        |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                   | NUM<br>PREVIO | MBER<br>OUSLY<br>FOR            | PRESENT<br>EXTRA                             |                   | RATE                | ADDI-<br>TIONAL<br>FEE     |            | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus             | **            |                                 | =  |                   | X\$ 9=              |                            | OR         | X\$18=              |                        |
|   | Independent  | * NTATION OF M                            | Minus             | ***           | T OL AIM                        | <u>                                     </u> | [                 | X40=                | ·                          | OR         | X80=                |                        |
|   | HHS1 PHESE   | NIATION OF MI                             | JLIIPLE DEF       | ENDEN         | I CLAIM                         |  | ] [               | +135=               |                            | OR         | +270=               |                        |
|   |  |   |                   |               |                                 |  |                   | TOTAL<br>ADDIT. FEE |                            | OR         | TOTAL<br>ADDIT. FEE |                        |
|   |  | (Column 1)                                |                   | (Colu         | ımn 2)                          | (Column 3)                                   |                   | 10011.1             |                            |            |                     |                        |
| AMENDMENT B   | a respective to the second                           | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                   | NUM<br>PREVI  | HEST<br>MBER<br>IOUSLY<br>D FOR | PRESENT<br>EXTRA                             |                   | RATE                | ADDI-<br>TIONAL<br>FEE     |            | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus             | **            |                                 | =  |                   | X\$ 9=              |                            | OR         | X\$18=              |                        |
|   | Independent  | *   | Minus             | ***           |                                 | =  | ] [               | X40=                |                            | OR         | X80=                |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM       |   |                   |               |                                 |  | ┧╽                | +135=               |                            | OR         | +270=               |                        |
|   |  |   |                   |               |                                 |  | į                 | TOTAL               |                            |            | TOTAL               | <del>  </del>          |
|   |  |   |                   |               |                                 |  |                   | ADDIT. FEE          |                            | OR         | ADDIT. FEE          |                        |
| (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST   |  |   |                   |               |                                 |  |                   |                     |                            |            |                     |                        |
| AMENDMENT C   |  | REMAINING<br>AFTER<br>AMENDMENT           |                   | NUN<br>PREVI  | MBER<br>TOUSLY<br>D FOR         | PRESENT<br>EXTRA                             |                   | RATE                | ADDI-<br>TIONAL<br>FEE     |            | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus             | **            |                                 | =  | ┇                 | X\$ 9=              |                            | OR         | X\$18=              | ï                      |
|   | Independent  |   | Minus             | ***           |                                 | =  | ┨╏                | X40=                |                            | OR         | X80=                |                        |
| L   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135= |   |                   |               |                                 |  |                   |                     | _                          |            | +270=               |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |  |   |                   |               |                                 |  |                   |                     |                            | OR         | TOTAL               | -                      |
| ** If the "Highest Numb r Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriat box |  |   |                   |               |                                 |  |                   |                     |                            | OR         | ADDIT. FEE          |                        |
|   | The "Highest Nur                                     | nber Previously Pa                        | aid For" (Total o | r Indepen     | dent) is the                    | e highest numb                               | ber fou           | and in the ap       | propriat bo                | x in co    | olumn 1.            |                        |